

Name in Full

Certificate of Death

James Barrett

Town

County

Died at New Church Hill James James MARYLAND

Date 1922 May 17 Age 65 - - Native of Md Occupation Outfitter

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single Widower Number of children living 4

Husband of

Wife

Father's Name Landen Myers Mother's Name

Name Maiden Name

Cause of Primary

How long sick

Death Immediate

Accident, Suicide, Homicide

Reported by S. B. Dudley M.D.

Address Church Hill Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Burnsville

Name In Full

Certificate of Death

Charles Blunt,

Town

County

Died at

Guys P.O.

Queen Anne

MARYLAND

Month Day

Y.

M.

D.

Native of

Occupation

Date 1902

5 24

Age

8

MD

Male

White

MarriedWidowDivorcedFemaleColoredSingleWidowerNumber of children living

Husband of

Wife

Father's

Name

James R. Blunt

Mother's

Maiden Name

Annie Melvin

Cause of

Primary

Pertussis

How long sick

Two weeks

Death

Immediate

Congestion Brain

Accident, Suicide, Homicide

Reported by

Harvard R. Hepkins.

Address

Lancaster.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

MD.



Name in Full

Certificate of Death

Thomas R. Booker

Died at

Town  
Ridgely

County

Anne Arundel  
Carroll Co

MARYLAND

Date 1902

Month Day

5- 27

Age 28

Y. M. D.

Native of

md

Occupation

Oysterman

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Jos. R. Booker

Elin. Lane

Cause of

Primary

How long sick

Death

Immediate

Killed by R. R.

Accident, Suicide, Homicide

Reported by

J. M. Beall  
Hord Storemd  
md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Mary Addalade Clayton

Town

County

Died at Near Centerville Queen Anne's Co.

MARYLAND

Date 1902 5 - 25 Age 40 about Native of Md. Occupation House Wife

~~Male~~~~White~~

Married

~~Widow~~~~Divorced~~

Female

Colored

~~Single~~~~Widower~~

Number of children living

four

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Indigestion

104

How long sick

Several weeks

Death

Immediate

~~Accident, Suicide, Homicide~~

Reported by

Robt. W. Eddins of Wright &amp; Eddins

Address

Undertaker

Centerville Md.

Must be signed by physician, If any in attendance, otherwise by coroner, undertaker or minister.

Done

foregoing information given to me  
by husband of Deceased in presence  
of several women. Dr J. M. Corkran  
had sent medicine by description &  
upon the application of Harry Clayton

Robt. W. Abbie



Name in Full

Certificate of Death

Name *Maria A. C. Crouch*  
 Town *Millington* County *Wright* *Wright*  
 Died at *Millington* MARYLAND

Date 1902 *5* *16* *7*  
 Month Day Y. M. D. Age *7-7-1*  
~~Male~~ White Married ~~Widow~~ Divorced  
 Female Colored Single ~~Widowed~~ Number of children living *5*

Husband of

Wife

Father's

Name

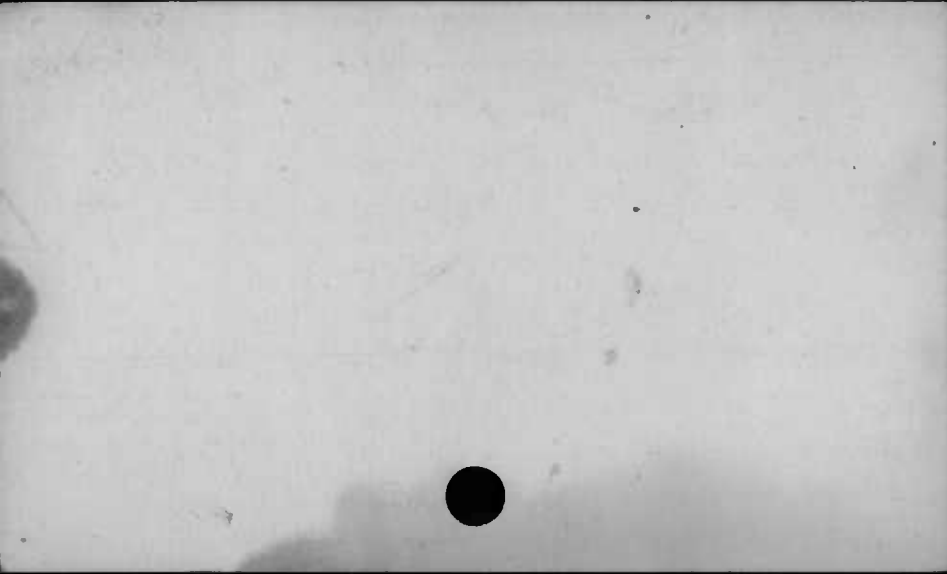
Mother's

Maiden Name

Cause of Death { Primary *Tuberculosis* How long sick *2 weeks*  
 Immediate Accident, Suicide, Homicide

Reported by *Dr. W. T. Jacobs*Address *Millington* *Maryland*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Mary Elizabeth Surney

Town

County

Died at

Centerville

Q. S. Co.

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 19

02

05 25

Age

74

Penn.

None

~~Male~~

White

~~Married~~

Widow

~~Divorced~~

Female

~~Colored~~~~Single~~~~Widower~~

Number of children living

4

Husband

of

Wife

Father's

Name

Henry Clemer

Maiden Name

Esther Clemer

Cause of

Primary

Organic Heart Trouble

How long sick

2 years

Death

Immediate

Hemorrhage

~~Accident, Suicide, Homicide~~

Reported by

79

Jas. Bordley M.D.

Address

Centerville

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

E. J. Emory

Died at

Town

County

MARYLAND

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

2 5 16 Age 70 Mo Labor

Male

~~White~~

Married

~~Widow~~~~Divorced~~~~Female~~

Colored

~~Single~~~~Widower~~

Number of children living

3

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Immediate

Death

Aortic Stenosis 79 9 yrs

Dyspnea, insufficiency

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Orvel H. Gorman.

Town

County

Died at

Hope

Queen Anne

MARYLAND

Date 1902

Month

Day

5

6

Age

Y.

M.

D.

17

Native of

Occupation

Queen Anne

Male

~~White~~

Married

Widow

~~Divorced~~

Female

Colored

Single

~~Widower~~

Number of children living

Husband  
of

Wife

Father's

Name

William Gorman

Mother's

Maiden Name

Sarah E. Gibbs

Cause of

Primary

Whooping cough

How long sick

4 months

Death

Immediate

Cold

Accident, Suicide, Homicide

Reported by

Jos. S. Dawson.

Address

Centerville Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

No Doctor. Information from  
Mr. Norman the Father.  
Hope  
Queen Anne Co.  
Md.



Name in Full

Certificate of Death

Eleanor Frisby

Town

County

Died at

MARYLAND

Date

Month

Day

Y.

M.

D.

Native of

Occupation

Date

Age

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

How long sick

Death

Immediate

Accident Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55088



Name In Full

Certificate of Death

Ida Virginia Green

Died at <sup>Town</sup> *Rolphs* <sup>County</sup> *Queen Anne*

MARYLAND

Date 19 *02* <sup>Month</sup> *May* <sup>Day</sup> *23* Age *22* <sup>Y.</sup> *11* <sup>M.</sup> *16* <sup>D.</sup> *Q. A.* <sup>Native of</sup> *Q. A.* <sup>Occupation</sup> *Servant*

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~  
 Female ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband of \_\_\_\_\_

Wife

Father's Name *Samuel Green*Mother's Maiden Name *Elizabeth Goldsborough*

Cause of { Primary *Phthisis* How long sick *7 mo*  
 Death { Immediate *Exhaustion* Accident, Suicide, Homicide

Reported by *H. G. Simpson, M. D.*  
 Address *Chestertown, Kent Co.*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

George O. Haudey

Died at <sup>Town</sup> Gauleyton <sup>County</sup> Tucker

MARYLAND

Date 1902 <sup>Month</sup> 5 <sup>Day</sup> 7 <sup>Age</sup> 73 <sup>Y.</sup> <sup>M.</sup> <sup>D.</sup> <sup>Native of</sup> Md <sup>Occupation</sup> Laborer

<sup>Male</sup> <sup>White</sup> <sup>Married</sup> <sup>Widow</sup> <sup>Divorced</sup> no <sup>Number of children living</sup> 6

~~Female~~ <sup>Colored</sup> ~~Single~~ <sup>Widower</sup>

Husband of Margaret Haudey 120

Father's Name Perry Haudey Mother's Name Mary Brown

Cause of Death { Primary Chronic Interstitial Nephritis How long sick 5 or 6 yrs

Immediate Cerebral Hemorrhage Accident, Suicide, Homicide

Reported by M. D. Morkrae

Address 8 Tucker Ave, Co. Gauley

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name In Full

Certificate of Death

*Antonia Hyman*  
 Town *Hyman* County *Hyman*

Died at *Ennington, D. C.* MARYLAND

Date 1902 *5.26* Month *5* Day *26* Y. *79* M. *-* D. *-* Native of *D. C.* Occupation *Misc.*  
 Male *White* Married *Widow* Divorced *5*  
 Female *Colored* Single *Widower* Number of children living *5*

Husband of *Don't know*  
 Wife *Don't know*

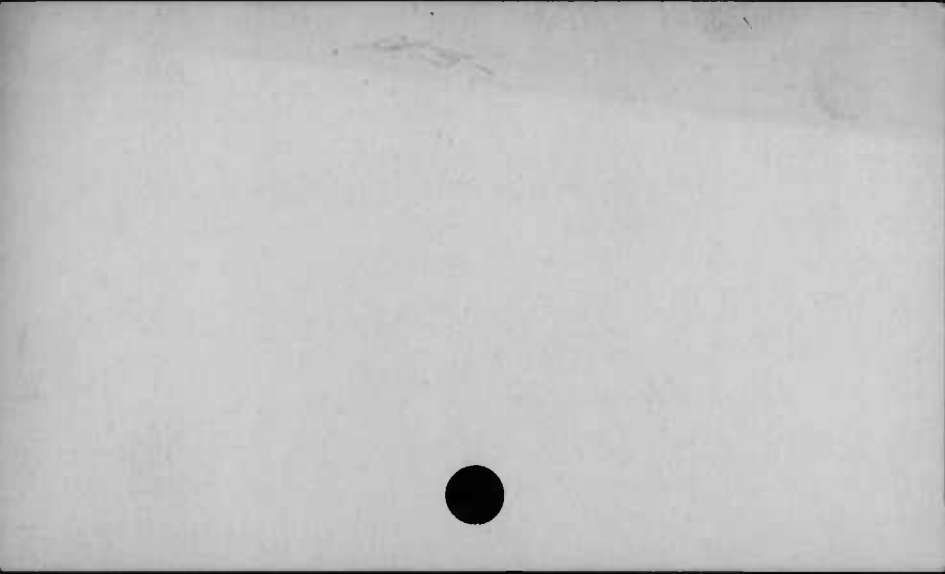
Father's Name *79* Mother's Maiden Name *79*

Cause of Death { Primary *Endocarditis, Valvular lesions* How long sick *5 months*  
 Immediate *-Exhaustion, I have only seen within the last few days* Accident, Suicide, Homicide

Reported by *Mr. Hyman*

Address *Clear Lake Hills Maryland*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.





Name in Full

Certificate of Death

Mrs James Kimbles

Town

County

MARYLAND

Died at Maryland

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902 May 27 Age 54

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

6

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

How long sick

1 wk

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Church Hill  
Cemetery

Died at *near Churchville* Town *Queen Anne* County *MARYLAND*  
 Date 1902 *5* Month *26* Day *54* Y. M. D. Age *Housewife* Occupation  
 Male *White* Married *Widow* Divorced *Two*  
 Female *Colored* Single *Widower* Number of children living

Husband of *Frank Leverette*  
 Wife  
 Father's Name Mother's Name  
 Maiden Name

Cause of Death { Primary *Endocarditis* Immediate *Paralysis*  
 How long sick *Three Years*  
 Accident, Suicide, Homicide

Reported by *H. H. G. Medow*  
 Address *Churchville*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Chorus & Vice  
Cerby

Julia C. Lilly

Town

County

Died at New England

Queen Anne

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902.

5

31

Age

19

2. A. Co

House wife

~~Male~~~~White~~

Married

~~Widow~~~~Divorced~~

Female

Colored

Single

Widower

Number of children living

1

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Hydrothorax of left Lung about 4 months

How long sick

Death

Immediate

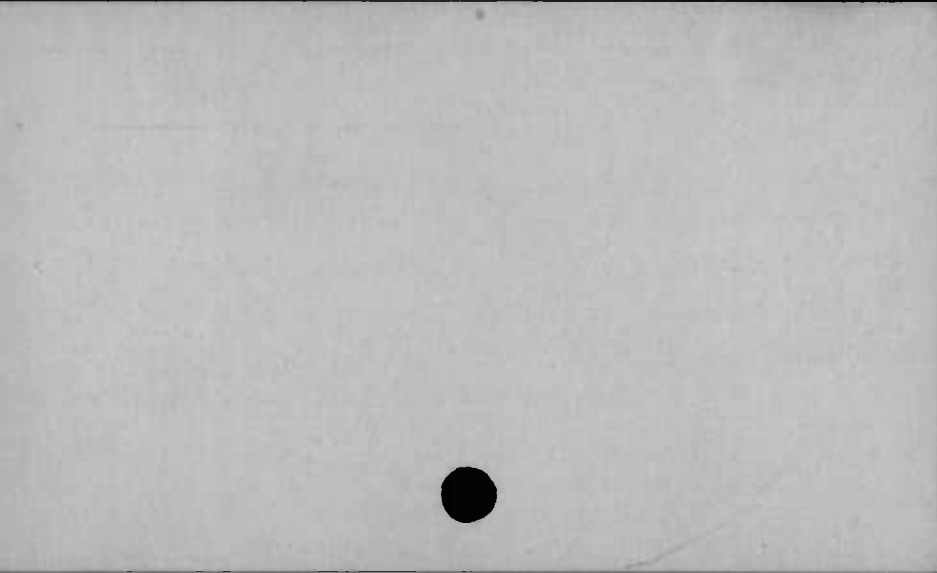
Exhaustion, only saw this day before death

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Mary Matilda Loyd

Town

County

MARYLAND

Died at

Spearing Hill 2 a.m.

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

5 13

Age

- 6 -

2 a.m.

Infant

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Lillian Scott

Cause of

Primary

Pneumonia

93

How long sick

one week

Death

Immediate

Sudden failure

Accident, Suicide, Homicide

Reported by

Howard R. Hopkins

Address

Greenstown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79808





Lula Mc Clements

Town

County

Died at

McEwens

Queen Anne

MARYLAND

Date 1902

May 15

Age

Y. M. D.

Native of

Occupation

-- 11

Md

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~~~Single~~~~Widower~~~~Number of children living~~

Husband

of

Wife

Father's

Name

George Mc Clements

Mother's

Maiden Name

Sallie Carroll

Cause of

Primary

Brain pressure.

How long sick

11 days

Death

Immediate

Meningitis

~~Accident Suicide Homicide~~

Reported by

F. W. Sheppard M.D.

Address

Compton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Rosie Mackle

Town

County

Died at

Hope

Queen Anne

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

May 19

Age

6 24

Md

~~Male~~~~White~~~~Married~~~~Widow~~~~Divorced~~

Female

Colored

Single

~~Widower~~

Number of children living

~~Husband~~  
~~Wife~~ ofFather's  
Name

Levi Mackle

Mother's

Maiden Name

Beyanna Blosser

Cause of

Primary

Whooping cough

How long sick

1 week &amp; 4 days

Death

Immediate

Exhaustion

~~Accident, Suicide, Homicide~~

Reported by

Walter H. Fendley

Address

Ruthsburg, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79893



Margaret Alice Morris

Town

County

MARYLAND

Died at Mar Centerville

Queen Anne

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

5

7

Age 41

Md

Housewife

~~Male~~

White

Married

~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

8

Husband of

Wm Morris

Wife

Father's

Name

Mother's

Maiden Name

William Turner Frances R Turner

Cause of

Primary

Organic Heart trouble

How long sick

2 or 3 months

Death

Immediate

Accident, Suicide, Homicide

Reported by

M. Morris

Address

Queen Anne's Centerville

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Florence L. Mullikin

Town

County

Died at *Lucas Ave. Lucas Ave.*

MARYLAND

Date	Month	Day	Y.	M.	D.	Native of	Occupation
1902	May	27		6	17	Ind.	
Male	White	Married		Widow		Divorced -	
Female	Colored	Single		Widower		Number of children living	

Husband of

Wife

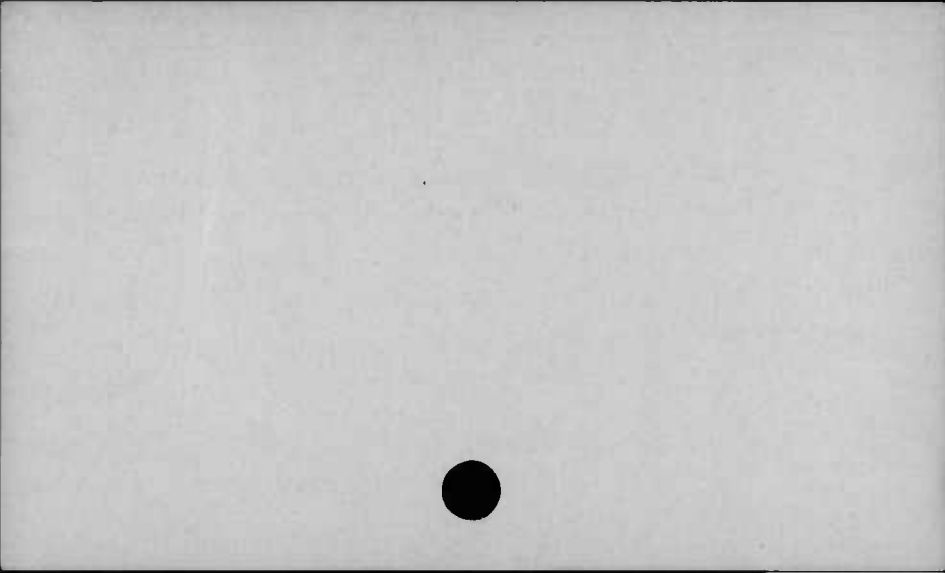
Father's Name	Mother's Maiden Name
<i>Walter Mullikin</i>	<i>Florence Wilson</i>

Cause of Death	Primary	Immediate	How long sick	Accident, Suicide, Homicide
	<i>Asphyxia</i>	<i>Strangulation</i>	<i>one week</i>	

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.





Name In Full

Certificate of Death

John H. Morris

Town

County

Died at

Templerville

L. A.

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

5 17

Age

23

Md

Farmer

Male

White

~~Married~~

Widow

~~Divorced~~~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Consumption

Death

Immediate

How long sick

14 months

Accident, Suicide, Homicide

Reported by

Jas. Abraham M.D.

Address

Ingle side Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898



Name in Full *Joseph L. Peters*  
 Died at *Centerville* <sup>Town</sup> *L.A.* <sup>County</sup>  
 Date 19*02* <sup>Month</sup> *5* <sup>Day</sup> *16* <sup>Y.</sup> *60* <sup>M.</sup> *60* <sup>D.</sup> *60* <sup>Native of</sup> *Md* <sup>Occupation</sup> *Carpenter*  
 Male ☒ Female ☐ White ☒ Colored ☐ Married ☒ Single ☐ Widow ☒ Widower ☐ Number of children living *2*

Husband of

Wife

Father's  
Name

Mother's

Maiden Name

Cause of Primary

Death Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Barry Potts

Town

County

Died at

Pondtown

Dorson Anne

MARYLAND

1902

Month

Day

Y

M.

D.

Native of

Occupation

Date 1902

May 1

Age

14

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

0

Husband

of

Edward Potts

Wife

Barry Potts

Father's

Name

Edward Potts

Mother's

Name

Mary Washington

Cause of

Primary

How long sick

3 days

Death

Immediate

Spasms

71

Accident, Suicide, Homicide

Reported by

Mrs J. Miller

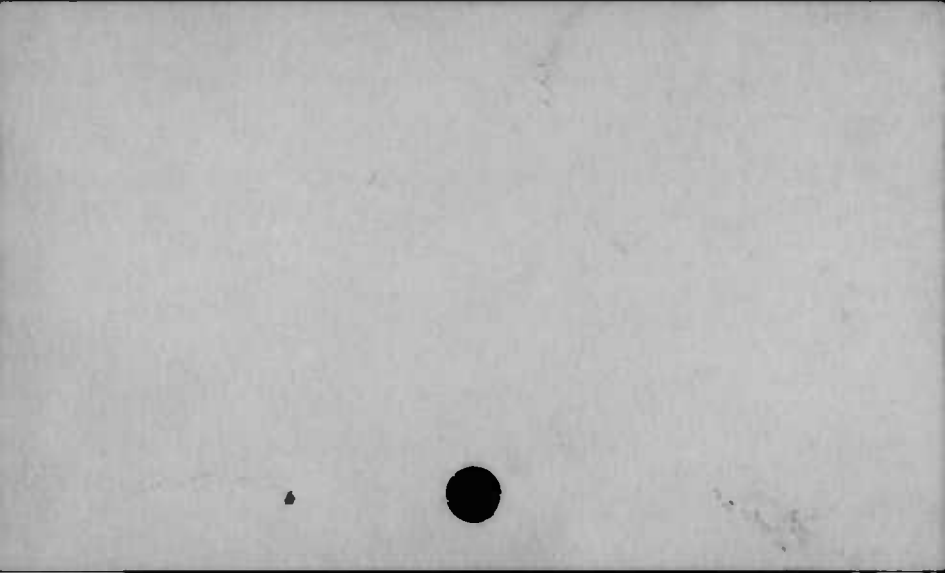
undertaker

Carmpton

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY OF THE



Ella E. Summers

Town Queen Anne's

County Queen Anne's

Died at

~~Bridgeton~~

MARYLAND

Date 1902

Month 5 Day 27

Age 30

Y. M. D. Native of

Occupation

Housekeeper

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living 3

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Edw. Mansfield

Margret. Gray

Cause of

Primary

How long sick

Y X X

Death

Immediate

Killed by R.R.

Accident, Suicide, Homicide

Reported by

N. W. Beall M.D.

Address

Chadwell Street

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.





Name in Full

Certificate of Death

*Alice May Vansant*  
 Town *Kent Island* County *Queen Anne's* MARYLAND  
 Died at  
 Date 19 *02* May *2* Age *7* Y. M. D. *Kent Island* Native of *None* Occupation  
 Male *White* Married *Widow* Divorced  
 Female *Single* Number of children living

Husband of

Wife

Father's Name *J. Herman Vansant* Mother's Maiden Name *Chary M. Hall*

Cause of Death { Primary *Garr Throat* Immediate  
 How long sick *7*  
 Accident, Suicide, Homicide

Reported by *Gerard Thomsen undertaker*  
 Address *Kent Island 2460 Md*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

John A. Wallace

Town

County

Died at

Whinchester Queen A.

MARYLAND

Date 1902

Month Day

Y.

M.

D.

Native of

Occupation

5-5-

Age 83

Md

Farming

Male

~~White~~

Married

~~Widow~~~~Divorced~~~~Female~~

Colored

Single

~~Widower~~

Number of children living

Husband of

Wife

Father's

Name

Mother's

Maiden Name

John A. Wallace

Jeramiah Wallace

Roas. Pinkerson

Cause of

Primary

Asthma

x

How long sick

4 month

Death

Immediate

old age

154

Accident, Suicide, Homicide

Reported by

Jas O Saddle

Address

Whinchester Queen A. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 76808



Susan Walls

Town

County

Died at J. B. near Church Hill Green Anne MARYLAND

Date 1902 May 24 Age 67. 7. 2 Native of 2. A Co. Md Occupation Housewife

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~ ~~Widower~~ Number of children living 3

Female ~~Colored~~ ~~Single~~

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Immediate

Death

How long sick

~~Accident, Suicide, Homicide~~

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Elena Wilkinson

Town

County

Died at

Cumberland

Queen Anne

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

May 13"

Age

75 . .

~~Male~~

White

Married

Widow

~~Divorced~~

Female

~~Colored~~

Single

Widower

Number of children living

1

Husband

Wife

Father's

Name

of John Wilkinson Jr  
John Berchtold  
Maiden Name Elena Berchtold

Cause of

Primary

Old age

Death

Immediate

Cancer

How long sick

1 year

~~Accident~~ ~~Suicide~~ ~~Homicide~~

Reported by

J A Hutton M D

Address

Cumberland

Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

